TAMALA HOLLAND PARALEGAL SPECIALIST SSEGNATED OFFICE 306-6483

|--|

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. FILING DATE APPLICANT(S)

- -			(FOR	USE WITH	FORM P	AFFLICANT(S)									
	<u> </u>	T			AFTER AFTE 1st AMENDMENT 2nd AMEND			CLAIN	15						
-			FILED	1st AME	NOMENT	AF 2nd AM	TER ENDMENT	_		1.		•		i .	
-	1	IND.	DEP.	IND.	DEP.	IND.	DEP.]		IND.	DEP.	IND.	1 050	 	
	2		+-	- -/-	 		<u>.</u>		51			1115.	DEP.	IND.	DEP.
	3		1-5	 	1		-:-		52					-	+
	4	·	1	7-					53						
	5		4-						54_	 		•			
	6		I ()	7				-	55						
 	7				1			H	56 57	 					
—	8		14		1.			ŀ	58						
<u> </u>	9		4	 				[59						
	0		(1)					Ī	60						·
	2			╂╼╼╌┆					61			. 			
	3								62						
	4			 `` 				L	63						
				 				L	64						
1				-				-	65						
1	7						-	 -	66			-			
								⊢	67 68						
20								<u> </u>	69						
21									70	_					
22									71	- 1				\dashv	
23								-	72					 -	
24	\bot							-	73					-	
25						-		-	74						
26	- -							-	75 76		-				
27	4							-	77		-				
28	4	-							78				-	$-\bot$	
30	┪-								79						
31	1						 -		80					-\-	
32			_		 - -			_	81						
33							\dashv		82						\neg
34	1				- j		\dashv		83			_			
35	╀-		\perp			_			35				_ _		
36	┼			<u> </u>				-	36		+-				
37	├-							_	7	_					
38	+-								8	+-	_	+-	-+-		
40	 				<u> </u>	_	\Box	8	9		1-		+	- 	
41		+	+	 				9	0					+	
42	_	+	_	 				9						1	\dashv
43			_			+-		9						1	\neg
44							\dashv	9:					·		7
45		i, i			1	+	-	94	_						\Box
46			$\perp \Gamma$		1	+-		96					4_		
47		4_	工				\neg	97							_ ·
48								98			+	+			_
50		+						99		_	 	+	-	+	\dashv
		٠.		- 	┪		-	100	工					+	- '
OTAL D. AL		┸╻	7		 			TOTAL		J T		1		1	7
IALs	<u> </u>		/				ا ل	TOTAL		-+-		4_		لب	
O-1360	(3-72)		(0	- Constitution of				IPIA				7.00			
500	,,0/			*MAY 1	e used 1	OR ADD	ITIONAL (CLAIMS	OR AME	NDMENT	U.S. D	EPARTM	ENT. of CO	MMERCI	#